

ATTACHMENT A
INVOICE FOR DAY REPORTING CENTER ENRICHMENT SERVICES

MERRILL COMMUNITY SERVICES
16806 Ceres Street
Fontana, CA 92335

Probation Department
175 West Fifth Street
San Bernardino, CA 92415
ATTN: Laura Gonzales
AB 1913 Coordinator

MONTH/YR _____

\$25 PER MINOR PER DAY

TOTAL COST

\$

DAY OF THE MONTH	TOTAL # OF STUDENTS	TOTAL HOURS FOR ALL STUDENTS	DAILY COST (TOTAL # OF STUDENTS X \$25)
1			
2			
3			
4			
5			
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31			

NAME _____ TITLE _____ PHONE _____

SIGNATURE _____ DATE _____

ATTACH SIGN-IN SHEETS FOR EACH CLASS